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**Application Number** 

## CORRESPONDENCE ADDRESS 10/8/2003 Filing Date Application Ralph F. Kalles First Named Inventor 3626 Art Unit Address to: Commissioner for Patents P.O. Box 1450 **Examiner Name** Alexandria, VA 22313-1450. 036806.00431 Attorney Docket Number Please change the Correspondence Address for the above-Identified patent application to: Customer Number: 27805 OR Firm or Thompson Hine LLP Individual Name Address 2000 Courthouse Plaza N.E. 10 West Second Street Address Ohio Dayton 45402-1758 City State USA Country 937-443-6600 937-443-6635 Telephone This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). I am the: Applicant/Inventor Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Attorney or Agent of record. Registration Number 46,706 Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number Typed or Printed Michael A. Forhan Signature Telephone 937-443-6600 2-26-04 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. Total of 1 forms are submitted.

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